



## Office of the Administrative Director — Financial Services Division

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September 26, 2008

To: All Interested Providers

From: Janell M. Kim, Financial Services Administrator

Subject: Request for Information  
Additional Health & Human Services for the period July 1, 2009 through June 30, 2011

The Judiciary, State of Hawaii is publishing this Request for Information (RFI) pursuant to Chapter 103F, Hawaii Revised Statutes, to obtain comments and suggestions from interested providers for the planned purchases of additional Health and Human Services for the period July 1, 2009 through June 30, 2011 subject to availability of funds. Draft service specifications for the additional purchases are attached to this RFI for your review or are available through the Judiciary's website at <http://www2.hawaii.gov/jud> under "Doing Business with the Judiciary"

Persons or organizations interested in commenting about the draft specifications may submit, email, or postmark their comments by **October 24, 2008** to the appropriate program contact person listed in the RFI. Input received in response to this RFI may be incorporated into the specifications and be used in a formal Request for Proposals, tentatively scheduled for November 2008 (Note: The receipt of comments to this RFI will not be a pre-requisite to submit proposals for the subsequent RFP.) Contracts resulting from the RFP will be for the periods indicated in each service specification.

Programmatic questions regarding this RFI shall be directed to the appropriate program contact person indicated in each service specification, while other RFI questions may be directed to Naty Butay in the Judiciary Contracts & Purchasing Office at 808-538-5805, or email [naty.b.butay@courts.state.hi.us](mailto:naty.b.butay@courts.state.hi.us). Thank you.

JANELL M. KIM  
Financial Services Administrator

(State Procurement Office and Judiciary website: September 26, 2008)

# **THE JUDICIARY, STATE OF HAWAII**

## **REQUEST FOR INFORMATION DRAFT SERVICE SPECIFICATIONS September 2008**

**The following Section Two - Service Specifications, is an excerpt from a draft Request for Proposal (RFP) tentatively scheduled to be issued in November 2008. Pursuant to Chapter 103F, Hawaii Revised Statutes, this Request for Information (RFI) is submitted at this time, prior to the RFP, for the purpose of obtaining comments and suggestions from interested providers of such services. Input received in response to this RFI may be incorporated into the specifications and used in the formal RFP.**

### **SECTION TWO - SERVICE SPECIFICATIONS**

#### **2.0.1 Introduction**

##### **A. Background**

The Judiciary, State of Hawaii, provides support, intervention and/or rehabilitative services to juveniles, adults and families through its Adult Client Services (aka Adult Probation Divisions), Juvenile Client and Family Services (aka Family Courts), Children's Justice Centers, and Drug Courts in each judicial circuit. It also provides mediation services through its Center for Alternative Dispute Resolution. In carrying out their goals for these areas, all circuits utilize community resources on a purchase Health and Human Services basis.

The following provides the specifications for organizations wishing to provide services to the Judiciary for the period July 1, 2009 through June 30, 2011. Upon evaluation and acceptance of proposals, when practicable and upon mutual agreement, contracts may be negotiated on a statewide basis, making services available to children, youth, adults and families in all circuits.

##### **B. Purpose or Need**

The Judiciary purchases services in compliance with statutory mandates and orders from the courts. The greater public purpose for obtaining the services is to: enhance public and victim safety; provide rehabilitative or intervention services to offenders; promote the welfare of families and children by protecting them from physical and psychological harm; and maintain a judicial process that helps to reduce the courts' workload while promoting fairness and prompt action.

Planning activities related to this RFP involved the issuance of requests for information (RFI). Tentative specifications and funding allocations were included with the RFIs, and comments and inputs on aspects of the specifications, such as

objectives, target group(s), services and costs, were welcomed. Meetings and discussions were also offered. The views of service recipients and community advocacy organizations were also considered on conditions affecting the achievement of mandated goals. Input was also obtained from funding sources, including the Legislature and federal agencies.

**Note:** The following segment contains the program specifications for the requested services.

## 2.0.2 Description and Location of Services

Service Specification Number	Service Spec. Code	Description of Service	1st Circ. (Oahu)	2nd Circ. (Maui, Molokai, Lanai)	3rd Circ. (Hawaii)	5th Circ. (Kauai)	Admin. Services
		<b>Adult Client Services</b>					
2.1	ACSA	Adult Substance Abuse Treatment Services		X			
		<b>Juvenile Client and Family Services</b>					
2.2	GC11C	Girls Court	X				
2.3	JCFRS	Residential Services		X			
		<b>Drug Court</b>					
2.4	DR2MDC	Maui Drug Court		X			

**2.1 RFP Title: Adult Client Services**  
**ACSA – Adult Substance Abuse Treatment Services**

**2.1.1 Introduction**

**A.&.B. –(SEE SECTION 2.0.1)**

**C. Description of the goals of the service**

The goals of the requested service are: (1) To provide a comprehensive evidence-based, offender-oriented, continuum of substance abuse treatment services to adults with alcohol and/or other drug problems, who are ordered or directed by the court to obtain treatment; and the goal of treatment will be to assist adult offenders, abusing or addicted to alcohol and/or other drugs with the acquisition and demonstration of effective strategies, skills and knowledge which will result in long-term abstinence and a reduction of their re-offending behaviors. The continuum includes Substance Abuse Assessment; Substance Abuse Education; Pre-Treatment/Motivational Enhancement Services; and Outpatient, Intensive Outpatient, Day and Residential Treatment, and Therapeutic Living Program treatment modalities.

**D. Description of the target population to be served**

The target population includes adult offenders, and other adults referred by the Judiciary, age 18 or older, male and female, supervised by the Adult Client Services Branches in all circuits of the Judiciary and/or under the auspices of the Judiciary's drug and other specialty court programs. The target population will include, but shall not be limited to pregnant/parenting women with alcohol and/or other drug related problems and offenders with co-occurring disorders.

**E. Geographic coverage of service**

Service areas include the following:

Second Circuit, Islands of Maui, Lanai and Molokai

Applicant shall demonstrate actual capacity to provide the required services in the service areas for which it is applying.

Applicants may propose to service clients from one or more geographic areas. Applicants need not submit separate proposals for each island. If an applicant proposes to service clients from more than one island, applicant's proposal shall indicate what services and capacity or capability in each island.

**F. Probable funding amounts, source and period of availability**

Funding amounts are not being stated at this time. Applicants should propose funding amounts in their proposals based on their best estimate for the cost of providing the services described in the proposal.

Funding sources:      State General Funds  
                                 Federal Grants  
                                 State Special Funds

Period of availability: A single term contract will be awarded for two (2) years, from July 1, 2009 to June 30, 2011 subject to appropriation and availability of funds and the satisfactory performance of services by the provider.

### **2.1.2 General Requirements**

#### **A. Specific qualifications or requirements, including but not limited to licensure or accreditation**

1. The applicant shall have licenses and certificates, as applicable, in accordance with federal, state, and county regulations, and comply with all applicable Hawaii Administrative Rules.
  - a. Residential programs, in accordance with Title 11, Chapter 98, Special Treatment Facility, must have a Special Treatment Facility license at the time of application and abide by applicable administrative rules governing accreditation of substance abuse treatment programs.
  - b. Therapeutic Living programs must meet the Department of Health, Alcohol and Drug Abuse Division's (ADAD) Therapeutic Living Program Requirements as specified in the Division's RFP Number HTH 440-08-1 for Substance Abuse Treatment Services until applicable administrative rules are implemented by the Department of Health.
  - c. All applicants shall comply with Title 11, Chapter 175, Mental Health and Substance Abuse System.
  - d. The proposed service must meet all required state licensing or certification standards, provide assurances of fair hearing and grievance procedures for clientele, civil rights compliance, information safeguarding practices and provide for proof of insurance coverage as applicable.

2. The Applicant shall submit in a timely manner upon request by the Judiciary, any additional information needed by the Judiciary to make a decision on the Applicant's proposal. The Judiciary may request an oral discussion or presentation in support of the proposal. On site visits may be made.
3. The applicant shall comply with the Chapter 103F, HRS Cost Principles for Purchase of Health and Human Services identified in SPO-H-201 (Effective 10/01/98) which can be found on the SPO website (See Section 5, POS Application Checklist, for the website address).

**B. Secondary purchaser participation**

(Refer to §3-143-608, HAR)

After-the-fact secondary purchases will be allowed.

**C. Multiple or alternate proposals**

(Refer to §3-143-605, HAR)

☐ Allowed ☒ Not allowed

**D. Single or multiple contracts to be awarded**

(Refer to §3-143-206, HAR)

☐ Single ☐ Multiple ☒ Single & Multiple

Multiple contracts may be awarded if such awards are deemed to be in the interest of the Judiciary, and will be based on the highest ranked proposals.

**E. Single or multi-term contracts to be awarded**

(Refer to §3-149-302, HAR)

☒ Single term (<2 years) ☐ Multi-term (>2 years)

A single term contract will be awarded for two (2) years, from July 1, 2009 to June 30, 2011.

**F. RFP Contact persons**

The individuals listed below are the points of contact from the date of release of this RFP until the selection of the winning provider or providers. Written questions should be submitted to the RFP contact person(s) and received on or

before the day and time specified in Section \_\_\_\_ (Procurement Timetable) of this RFP.

For technical questions related to the Request for Proposal process, please contact the following individual:

Judiciary Purchasing Office  
Naty Butay at (808) 538-5805 Fax: 538-5802  
Email: [Naty.B.Butay@courts.state.hi.us](mailto:Naty.B.Butay@courts.state.hi.us)

If you have any programmatic questions regarding the requested services, please call the following individual:

Maui: Client Services Division, Second Circuit  
Judy Kawano at (808) 244-2792 Fax: 244-2870  
Email: [Judy.R.Kawano@courts.state.hi.us](mailto:Judy.R.Kawano@courts.state.hi.us)

### **2.1.3 Scope of Work**

The scope of work encompasses the following tasks and responsibilities:

#### **A. Service Activities (Minimum and/or mandatory tasks and responsibilities)**

1. Applicants will provide a comprehensive continuum of evidence-based offender oriented treatment services to include Substance Abuse Assessments; Substance Abuse Education; Pre-Treatment/Motivational Enhancement services; Outpatient, Intensive Outpatient, Day and Residential Substance Abuse Treatment, Continuing/Aftercare, and Therapeutic Living modalities, to adults with alcohol and/or other drug related problems who are ordered or directed by the court to obtain such services. Applicants may propose the whole continuum or any part of the continuum.
  - a. Substance Abuse Assessments – Substance abuse assessments shall be completed or reviewed/approved by certified substance abuse counselors and are to include the determination of substance abuse or dependency and the determination of appropriate levels of care. Assessments will take into consideration client history of substance use; bio-medical conditions and complications; emotional, behavioral or cognitive conditions and complications; readiness to change; relapse, continued use or continued problem potential, and recovery/living environment.



- b. Assessments for First-Time Drug Offender (Act 44/2004 Legislature or HRS 706-622.5) – Substance abuse assessments by certified substance abuse counselors shall be completed to determine the need for substance abuse treatment due to dependency or abuse under the applicable Diagnostic and Statistical Manual, Addiction Severity Index, and the American Society of Addiction Medicine Patient Placement Criteria. These assessments shall be used for sentencing. Assessments may need to be conducted in institutions, i.e. the community correctional centers, Federal Detention Centers.
- c. Substance Abuse Education – Substance Abuse Education will provide participants with information pertaining to the pharmacology of substance abuse, lifestyle consequences, emotions management, coping skills and problem-solving training using cognitive behavioral techniques, treatment process, relapse prevention, and abstinence maintenance training.
- d. Pre-treatment/Motivational Enhancement Services – Pre-Treatment or Motivational Enhancement Services shall provide curriculum-based activities; cognitive-behavioral strategies to challenge thoughts, attitudes, and beliefs; motivational interviewing techniques; goal setting; skill development; and establishing commitment to change behavior.
- e. Outpatient Treatment – An Outpatient Treatment Program shall provide non-residential comprehensive specialized services on a scheduled basis for clients with substance abuse problems. Professionally directed evaluation, treatment, case management, and recovery services shall be provided to clients with less problematic substance abuse related behavior than would be found in a Residential or Day treatment program.  
  
An Outpatient Program shall provide between one (1) and eight (8) hours per client per week of face to face treatment, with a minimum of one (1) individual counseling session per month.
- f. Intensive Outpatient Treatment – An Intensive Outpatient Program shall provide a minimum of nine (9) hours per week of skilled treatment services. Such treatment usually operates for at least three (3) or more hours per day for three (3) or more days per week. Services may include individual and group counseling, medication management, family therapy, educational groups, occupational and recreational therapy, and other therapies.

Professionally directed evaluation, treatment, case management, and recovery services shall be provided.

Intensive Outpatient Programs shall provide a minimum of nine (9) hours up to a maximum of nineteen (19) hours per client per week of face to face treatment, with a minimum of one (1) individual counseling session per client per week.

- g. Day Treatment – A Day Treatment Program shall provide treatment activities offered in half-day or full-day increments, regularly scheduled for multiple sessions throughout the week. It includes a planned regimen of comprehensive outpatient treatment including professionally directed evaluation, treatment, case management, and other ancillary and special services. This level of care provides the offender with the opportunity to participate in a structured therapeutic program while being able to remain in the community.

Day Treatment shall provide a minimum of twenty (20) hours per week of face-to-face treatment and activities with a minimum of one (1) individual counseling session per week. The other nineteen (19) hours of face-to-face activities shall include, but are not limited to group counseling, education, skill building, recreational therapy, and family services.

- h. Residential Treatment – A Residential Treatment Program shall provide twenty-four (24) hour per day non-medical non-acute care in a residential treatment facility that provides a planned regimen of professionally directed evaluation, treatment, case management, and other ancillary and special services. Observation, monitoring, and treatment are available twenty-four (24) hours a day, seven (7) days a week, with a minimum of one (1) individual counseling session per week with each client.
- i. Continuing Care or Aftercare – Continuing or Aftercare is an organized service that shall provide treatment reinforcement services to the client who has completed treatment. Relapse and recidivism prevention shall be the focus.
- j. Therapeutic Living – A Therapeutic Living Program shall provide structured residential living to individuals who are without appropriate living alternatives and who are currently receiving substance abuse treatment in a Day, Intensive Outpatient, or Outpatient treatment program, or who have been discharged from residential treatment. Therapeutic Living programs shall provide

fifteen (15) hours per week of face to face therapeutic rehabilitative activities. Activities can include, but are not limited to, needs assessment, service planning, individual and group skill building and practice, referral and linkage, case management, client support and advocacy, monitoring, and follow up.

The primary focus of this program is to provide the necessary support and encouragement to enable the client to complete treatment outside of a residential program, adjust to a chemically abstinent lifestyle, and manage activities of daily living so that the individual can move towards independent housing and life management.

2. Proposals shall delineate the following:
  - a. Identification of target group(s) to be serviced by the Applicant, including any applicable admissions eligibility or exclusionary criteria.
  - b. Identification and brief description of the distinguishing highlights for the evidence-based treatment model(s) to be used.
  - c. Justification for the selection of the evidence-based treatment model(s).
  - d. For Residential and Day treatment programs, the length of time the client will be involved in structured activities per twenty-four (24) hours.
  - e. Identification of assessment instrument(s) to be used, the purpose of the instruments, and how the instruments will be implemented.
  - f. Identification of training(s) to be provided to staff, the frequency of the training(s), and the supervisory oversight for quality assurance.
  - g. Identification, description, and references for the curriculum to be used.
  - h. Identification of the program targets for change.
  - i. Identification of the program's completion criteria for the clinical discharge of the client.
  - j. Identification of the program's termination or discharge criteria.

- k. Description of Continuing Care/Aftercare services.
- l. Identification and description of a quality assurance program that involves client care and the delivery of services, the personnel who will implement the evaluation and review, and the procedures for corrective actions for problems identified.

(For those proposing to provide more than one modality of care, please describe how responses to the above listed items will differ, as applicable, across the continuum.)

- 3. Clients in any level of treatment shall meet the most current version of the American Society for Addiction Medicine Patient Placement Criteria (ASAM-PPC-2R) for admission, continuance, and discharge. Documentation shall be included in each client's chart.
- 4. Applicants shall provide written weekly progress reports for all drug or specialty court clients and/or as required by the coordinators of the respective courts. Written admission, monthly, and discharge reports shall be provided to supervising probation officers. Written discharge reports shall be provided no more than ten (10) working days after a client's discharge or earlier upon request of the supervising officer, for court hearing purposes. Discharge reports shall include the dates of admission, treatment, and termination; reasons for termination with explanation; discharge plans and recommendations (including recommendations for handling of client target behaviors, relapse prevention plans, possible sanctions, etc), when applicable. Applicants shall attach sample copies of report formats to be used for these purposes.
- 5. Programs shall notify the supervising officer or program of any prospective major change in a client's status (i.e. potential discharge or level of care change) occurring before the scheduled reporting cycle. Program staff will participate in team meetings with the Judiciary when it is determined to be in the best interests of the client's treatment and adjustment.
- 6. Applicants who provide Outpatient, Intensive Outpatient, Day, and Residential levels of treatment shall develop and implement appropriate transition plans for each client prior to discharge. The plan shall address transition and recovery issues and relapse prevention, and shall be forwarded to the supervising officer.
- 7. Applicants shall provide treatment transition assistance to the client in the event that treatment funding is to be terminated; i.e. referral to another program, referral back to supervising officer, etc.

**B. Management Requirements (minimum and/or mandatory requirements)**

**1. Personnel**

- a. The applicant shall possess and document knowledge, capacity, skills and experience in working with targeted population(s). Applicants shall describe the minimum qualifications for Program Director(s). The Program Director is defined as the person responsible for the overall management of the treatment program(s). The proposal shall include the educational backgrounds and experience of any current program director(s).

At a minimum, Applicants shall ensure that clinical supervision over program activities is provided by certified substance abuse counselors (CSACs) or program administrators certified pursuant to Section 321-193 (10), Hawaii Revised Statutes; or hold an advanced degree in a behavioral health science, with at least one year of experience working in the field of substance abuse addiction.

However, non- CSACs or non-master's level providers may be utilized as long as they are directly supervised by a CSAC or master's level counselor, and are working toward certification.

- b. Therapeutic Living Programs shall be provided by staff knowledgeable in substance abuse problems and experienced in case management activities.
- c. The applicant shall conduct a criminal history record check for any person, including, but not limited to any officer, employee, volunteer, or subcontractor, who performs work or services which necessitates close proximity to adult or juvenile clients, or other program related adolescents or children. At a minimum, applicants will search [www.ecrimhawaii.gov](http://www.ecrimhawaii.gov) (Adult Criminal Conviction Information System, Hawaii Criminal Justice Data Center) and [www.nsopr.gov](http://www.nsopr.gov) (National Sex Offender Public Registry). For persons working in positions which necessitate close proximity to children or adolescents, the criminal history record check shall include a national criminal history database check which may require fingerprinting. The minimum record check will be conducted once every four (4) years for each person, and/or at the outset of the contract period if such checks have never been conducted. Results of all criminal history record inquiries

conducted shall be placed in the employee's or volunteer's personnel file and shall be available to the Judiciary for review.

- d. The Applicant shall submit an agency organizational chart which includes and identifies all programs that the agency/Applicant oversees/administers, inclusive of subcontractors and consultants.
- e. The applicant shall have on the premises at least one person currently certified in First Aid or CPR.
- f. The staff and volunteers, if used by the applicant shall be under the supervision of the Program Director or his/her designee(s) and shall, accordingly, be trained in client confidentiality issues, ethics, and program quality assurance requirements.

## **2 . Administrative**

- a. The applicant shall establish and implement policies and procedures which clearly identify the target population for each type of service, group size, program content, and methods of service delivery.
- b. The applicant shall have the capability to provide drug testing. The applicant shall identify the product(s) and procedures used for drug testing and shall describe the frequency and application of such testing in treatment. Positive drug test results shall be reported immediately to the supervising agency/probation officer. A summary of drug test results will be included in the required weekly and monthly reports for each client.
- c. Court testimony by an Applicant representative shall be provided as needed.

## **3. Quality assurance and evaluation specifications**

- a. The applicant shall have a quality assurance plan which identifies the mission of the organization, what services will be provided, how they are delivered, who is qualified to deliver the services, who is eligible to receive the services, and what standards are used to assess or evaluate the quality and utilization of services.
- b. Program evaluation should reflect the documentation of the achievement of the stated goals, using tools and measures consistent with the professional standards of the disciplines involved in the delivery of services.

- c. Applicants shall agree, by contract, to be willing to undergo a program assessment and audit as designated by the contracting agency. Based on the assessment/audit report, the vendor will develop, in concert with the contracting agency, an action plan to address areas which need improvement.

**4. Output and performance/outcome measures**

- a. Output: The Applicant shall record unduplicated clients served. The unduplicated client count shall be recorded in the Applicants quarterly reports and aggregated Year-End Report.
- b. Outcome: The applicant shall propose measurement tools by which effectiveness of the services may be determined, as well as utilize any which may be developed and utilized by the Judiciary.

**5. Experience**

- a. The Applicant must have demonstrated competence or qualifications to perform the required services.
- b. The applicant must have a minimum of one (1) year of experience in the provision of substance abuse treatment services, or in the provision of Therapeutic Living Program services for substance abuse clients. In the absence of such experience, the Applicant shall provide supporting evidence why the one (1) year requirement should be waived.
- c. The applicant must have a minimum of one (1) year of experience in the provision of services to offenders. In the absence of such experience, the applicant will provide supporting evidence why the one (1) year requirement should be waived.

**6. Coordination of Service**

- a. Programs shall detail their ability to collaborate with other appropriate services, including but not limited to health, mental health, social, educational, vocational rehabilitation, and employment services.
- b. Programs intending to provide only part of the continuum shall also have and document appropriate linkages to other services on the continuum.

**7. Reporting requirements for program and fiscal data**

- a. The Applicant shall submit written Quarterly and Year-End reports summarizing output and outcome data, performance accomplishments, challenges, and actual expenditures. Quarterly reports are due thirty (30) days after the end of the quarter. Year-End reports are due forty-five (45) days after the end of each fiscal year and/or at the end of the contract period, as applicable.
- b. Reports shall consist of a statement by the Applicant relating to the work accomplished during the reporting period and shall include statements of the nature of the work performed, identification of persons served by the Applicant during the reporting period, identification of any immediate problems encountered during the reporting period, and any recommendations deemed pertinent by the Applicant, as well as a statement of what activities are proposed to be accomplished during the next reporting period. In addition to the written progress reports, the Applicant, upon request, shall be required to meet with representatives of the Judiciary to discuss the progress of the work required.
- d. The Applicant shall, at the completion of the contract period, submit a final written report to the Judiciary. The report shall include documentation of the provider's overall effort towards meeting the program goals and objectives. Furthermore, the Applicant shall furnish any additional reports or information that the Judiciary may from time to time require or request.
- e. Pursuant to HRS 601-21, the Applicant shall comply with the requirements of the statewide substance abuse treatment monitoring program established under HRS 321-192.5. The Judiciary additionally requires that all programs which provide substance abuse treatment services, whether accredited or not accredited by ADAD, participate in the statewide data collection activities under the purview of ADAD.

**8. Pricing or pricing methodology to be used**

Negotiated unit of service.

**9. Units of service and unit rate**

Proposals shall include, as applicable, average expected lengths of stays proposed for each level of care; group sizes and frequency of services (i.e. number of sessions per week), as applicable; and provide fees for units of services as follows:



- a. Substance abuse assessments/Per Assessment
- b. Assessments for First-Time Drug Offender/Per Assessment
- c. Substance Abuse Education/Per Hour/Per Individual
- d. Pre-Treatment -Motivational Enhancement/Per Hour/Per Individual
- e. Outpatient Treatment/Per Hour/Per Individual
- f. Intensive Outpatient Treatment/Per Hour/Per Individual
- g. Day Treatment/Per Day/Per Individual
- h. Individual and Family Counseling for Non-Residential Programs/Per Hour/Per Individual/Per Family
- i. Residential/Per Bed Day/Per Individual  
(To include allowances for individual and family counseling, as applicable)
- j. Continuing Care or Aftercare /Per Hour/Per Individual
- k. Therapeutic Living/Per Bed Day/Per Individual

(Initial screening and assessments for program acceptance shall be an imbedded cost. Applicants may cite unit rates by the half or quarter hour, as applicable.)

#### **10. Methods of compensation and payment**

- a. The Applicant shall provide monthly invoices. Information to be included will be client's name, date of admission, date of discharge, reason for discharge, level of service provided, and number of units provided with corresponding dates and service unit fee being billed.
- b. The Applicant shall maximize reimbursements of benefits for all levels of care through Hawaii Quest and Quest Net, the client's private insurance, the Department of Human Services, or any other sources of payment made known to the Applicant by the client for treatment, housing, or subsistence. Payments to the Applicant shall be reduced by received third party payments.

#### **2.1.4 Facilities**

- A. Applicants shall provide a description of its facilities and its conduciveness to the treatment being provided.
- B. Applicants proposing to provide Residential Treatment and Therapeutic Living Program services shall describe and include in the proposal the following:
  - 1. How security and client accountability will be achieved.
  - 2. A site map of the facility designating all program locations, the location of each dwelling for Residential and/or Therapeutic Living Program, and the gender for each dwelling.
  - 3. A floor plan for each dwelling laying out each bedroom for clients and resident counselor(s), kitchen, dining area, living area, bathrooms, and laundry area; the number of client beds per room; the number of resident counselor bed(s) per room; and the maximum capacity for each dwelling.
  - 4. The number of licensed beds for Residential and/or Therapeutic Living Program services by the Office of Health Care Assurance (OCHA), Department of Health, State of Hawaii.

**2.2 Service Spec. Title: Girls Court Program, First Circuit Court  
GC11C - In-Community Service**

**2.2.1 Introduction**

**A. & B. - (SEE SECTION 2.0.1)**

**C. Description of the goals of the service**

Female adolescents in the juvenile justice system exhibit high rates of mental health problems. Co-occurring disorders, histories of trauma and abuse, depression, self-mutilation, suicide attempts, substance abuse, and family conflicts are particular problems. Professional mental health services are needed for the female adolescents and their families participating in the Girls Court Program. The goal is that by effectively meeting the mental health treatment needs of girls in the juvenile justice system through a gender-responsive and strength and family-based treatment approach, the result will be more successful outcomes in helping them learn better coping strategies, improving their behavioral and life circumstances, and reducing the likelihood of their re-offending.

**D. Description of the target population to be served**

Female adolescents between the ages of 13-17 being serviced by the First Circuit's Girls Court Program.

**E. Geographic coverage of service**

Service areas include the following:  
First Circuit- Island of Oahu

**F. Probable funding amounts, source, and period of availability**

Probable funding amounts:

<u>FY 2010</u>	<u>FY 2011</u>
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Funding amounts are not being stated at this time. Applicants should propose funding amounts in their proposals based on their best estimate of the cost of providing the services described in this specification.

Funding source: State general funds

Period of availability: The Judiciary intends to award a single term contract. The term of the contract will not exceed two (2) years, e.g., July 1, 2009 to June 30, 2011 subject to the appropriation and availability of funds and satisfactory contract performance. All State funds are contingent on appropriations, and all Federal funds are contingent on the awarding of grant applications.

### **2.2.2 General Requirements**

#### **A. Specific qualifications or requirements, including but not limited to licensure or accreditation.**

1. The applicant shall have licenses and certificates, as applicable in accordance with federal, state, and county regulations, and comply with all applicable Hawaii Administrative Rules.
2. The applicant must have demonstrated competence or qualifications to perform the required services.
3. The applicant must have an accounting system, with acceptable accounting practices and standards.
4. The proposed service must meet all required state licensing or certification standards, provide assurances of fair hearing and grievance procedures for clientele, civil rights compliance, information safeguarding practices, and provide proof of insurance coverage as applicable.
5. The applicant shall submit in a timely manner upon request by the Judiciary, any additional information needed by the Judiciary to make a decision on the applicant's proposal. The Judiciary may request an oral discussion or presentation in support of the proposal. On-site visits may be made.
6. The applicant shall comply with the Chapter 103F, HRS Cost Principles for Purchases of Health and Human Services identified in SPO-H-201 (Effective 10/01/98), which can be found on the SPO website (See Section 5, POS Application Checklist, for the website address).

#### **B. Secondary purchaser participation** (Refer to Section 3-1143-608,HAR)

**C. Multiple or alternate proposals**  
(Refer to Section 3-143-605,HAR)

☐ Allowed

☒ Unallowed

**D. Single or multiple contracts to be awarded**  
(Refer to Section 3-143-206,HAR)

☐ Single

☐ Multiple

☒ Single and Multiple

**E. Single or multi-term contracts to be awarded**  
(Refer to Section=149-302,HAR)

☒ Single term (< 2 yrs)

☐ Multi-term (>.2 yrs)

**F. RFP contact persons**

The individuals listed below are the points of contract from the date of release of this RFP until the selection of the winning provider. Written questions should be submitted to the RFP contact person(s) and received on or before the day and time specified in Section \_\_\_\_ (Procurement Timetable) of this RFP.

If you have any technical questions regarding the requested services, please call the following individual:

Judiciary Contracts & Purchasing Office

Naty Butay at (808) 535-5805

Fax: (808) 538-5802

Email: [naty.b.butay@courts.state.hi.us](mailto:naty.b.butay@courts.state.hi.us)

If you have any programmatic questions regarding the requested services, please call the following individual:

Oahu: Program Specialist, First Circuit

Rachel Yuen at (808) 538-5951

Fax:(808) 539-4402

Email: [rachel.w.yuen@courts.state.hi.us](mailto:rachel.w.yuen@courts.state.hi.us)

### **2.2.3 Scope of Work**

The scope of work encompasses the following tasks and responsibilities:

**A. Service Activities (Minimum and/or mandatory tasks and responsibilities)**

**1. Individual and Family Therapy**

- a. The provider shall provide individual therapy on a weekly basis to girls identified by the Girls Court Program in need of services. The services are to help the girls address abuse or trauma issues, reduce self-injuring behaviors, identify behaviors that interfere with successful management of emotions, and develop better coping skills to deal with stresses and improve their functioning. These sessions may include the families or guardians of the Girls Court participants.
- b. Therapy sessions will be flexible with regard to time and place. For the purpose of outreach, sessions may be held at the Girls Court office, or in the community, including the Girls Court participant's school, home, or out-of-home placement site.
- c. Written treatment plans and goals will be developed for each Girls Court participant accessing therapy services, utilizing a strength-based model.
- d. Provider shall provide consultation to the Girls Court staff during weekly case reviews and on an as-needed basis, regarding issues of concern that may affect the overall well-being of the Girls Court participants.
- e. Provider shall be available to Girls Court participants during crisis situations as well as provide consultation to staff as needed during emergencies, including beyond regular work hours.

## **2. Parent Group Sessions**

- a. Provider shall facilitate and/or assist in facilitation of the Parent Group Sessions that are held after the Girls Court hearings.
- b. The purpose of the sessions is to engage the families in the Girls Court Program, as well as in the healthy development of the Girls Court participants.

## **3. Girls Group Sessions**

- a. The Girls Court participants attend bimonthly group sessions. Provider shall provide group facilitation.
- b. The purpose of the group sessions is to provide education, foster self-awareness and accountability, as well as to encourage the positive development of the Girls Court participants.

- c. Provider shall provide oversight and consultation to the Girls Court staff with respect to issues and concerns of group facilitation, in-group behavior management and follow-up to high risk disclosures.

#### **4. Girls Court Activities**

- a. Provider shall provide input into the planning of, and attend and participate in the Girls Court activities. These activities are designed to address the continuum of special needs of female adolescents and include physical and emotional health, sexuality, substance abuse, education, and employment.
- b. The schedule of activities is generally once per month includes quarterly community service events with girls and parents/guardians. During the Department of Education spring break, summer and fall inter-session, academic and/or vocational activities are additionally scheduled.

#### **5. Consultation**

- a. Provider shall participate as part of the Girls Court treatment team in meetings that may be scheduled by the Department of Education, Department of Health, and/or any of the respective contracted service providers.

#### **6. Documentation**

- a. After each individual and/or family therapy session, provider shall submit to the Girls Court Coordinator case notes that outline concerns and the participant's progress towards her goals. Each session is to be documented in the participant's file.
- b. If a court ordered therapy session fails to occur, provider will notify the Girls Court staff of the missed session and the reason.
- c. Provider shall maintain frequent contact with the Girls Court staff both by phone and in writing to inform them of the ongoing status of the cases.

### **B. Management Requirements (Minimum and/or mandatory requirements)**

#### **1. Personnel**

- a. The applicant must have good understanding of gender-responsive principles and apply it to service delivery.

- b. The applicant shall possess and document knowledge, capacity, skills and experience in working with the targeted population.
- c. The applicant shall conduct a criminal history record check for any person, including, but not limited to any officer, employee, volunteer, or subcontractor, who performs work or services which necessitates close proximity to adult or juvenile clients, or other program related adolescents or children. At a minimum, applicants will search [www.ecrimhawaii.gov](http://www.ecrimhawaii.gov) (Adult Criminal Conviction Information System, Hawaii Criminal Justice Data Center) and [www.nsopr.gov](http://www.nsopr.gov) (National Sex Offender Public Registry). For persons working in positions which necessitate close proximity to children or adolescents, the criminal history record check shall include a national criminal history database check which may require fingerprinting. The minimum record check will be conducted once every four (4) years for each person, and/or at the outset of the contract period if such checks have never been conducted. Results of all criminal history record inquiries conducted shall be placed in the employee's or volunteer's personnel file and shall be available to the Judiciary for review.

## **2. Administrative**

The applicant shall establish and implement policies and procedures which clearly identify the target population for each type of service, the program content and methods of service delivery.

## **3. Quality assurance and evaluation specifications**

- a. The applicant shall have a quality assurance plan which identifies the mission of the organization, what services will be provided, how they are delivered, who is qualified to deliver the services, who is eligible to receive the services, and what standards are used to assess or evaluate the quality and utilization of services.
- b. Program evaluation should reflect the documentation of the achievement of the stated goals, using tools and measures consistent with the professional standards of the disciplines involved in the delivery of services.

## **4. Output and performance/outcome measurements**



- a. Output: The applicant shall record unduplicated clients served. The unduplicated client count shall be recorded in the applicant's quarterly reports, culminating in a final unduplicated client count on the applicant's final report.
- b. Outcome: The applicant shall propose measurement tools by which effectiveness of the services may be determined, as well as utilize any provided by the Judiciary.

**5. Reporting requirements for program and fiscal data**

- a. The applicant shall submit written quarterly and year-end reports summarizing output and outcome data, performance accomplishments, challenges, and actual expenditures. Quarterly reports are due 30 days after the end of the quarter. Final reports are due 45 days after the end of each fiscal year and/or at the end of the contract period, as applicable.
- b. Reports shall consist of a statement by the applicant relating to the work accomplished during the reporting period and shall include statements of the nature of the work performed, identification of persons served by the applicant during the reporting period, identification of any immediate problems encountered during the reporting period, and any recommendations deemed pertinent by the applicant, as well as a statement of what activities are proposed to be accomplished during the next reporting period. In addition to the written progress reports, the applicant, upon request shall be required to meet with representatives of the Judiciary to discuss the progress of the work required.
- c. The applicant shall, at the completion of the contract period, submit a final written report to the Judiciary. The report will include documentation of the applicant's overall effort toward meeting the program goals and objectives. Furthermore, the applicant shall furnish any additional reports or information that the Judiciary may from time to time require or request.

**6. Pricing or pricing methodology to be used**

Negotiated or Fixed price.

**7. Units of service and unit rate**

Service	Unit	Frequency
Court Session	2 hrs/session	1 session/month

Parent Group	2 hrs/group	1 session/month	
Girls Group	2 hrs/group	2 sessions/month	
Individual Therapy Sessions	1 hr/session	2 sessions/month	12 girls
Family Therapy Sessions	1 hr/session	1 session/month	12 families
Treatment Team Meetings	2 hrs/mtg	1 session/month	girls/mo.
Staff Meetings	2 hrs/mtg	1 mtg/week	
Pre-court Conference	2 hrs/conf	1 mtg/month	
Activities	6 hrs/activity	1 activity/month	
After hours contact (evenings & weekends)	8 hours/week		

**2.3 RFP Title: Juvenile Client and Family Services  
JCFRS - Residential Services**

**2.3.1 Introduction**

**A.&B. –(SEE SECTION 2.0.1)**

**C. Description of the goals of the service**

The goal of this service is to provide a safe, nurturing environment for minors who have been ordered by the court and/or referred to participate in a residential program. Programs should provide clients with a safe, clean, supportive, well supervised environment in which minors can develop the tools and skills needed to function in society as young adults. Services should also be reflective of the court's balanced and restorative justice philosophy. The goals of balanced and restorative justice are accountability, competency development, and public safety.

**C. Description of the target population to be served**

Juveniles between the ages of 12 to 17 years who are adjudicated or non-adjudicated for law violations and/or status offenses

**D. Geographic coverage of service**

Second Circuit - Islands of Maui, Molokai, and Lanai

**E. Probable funding amounts, source, and period of availability**

Probable funding amounts: FY 2010 FY 2011

Funding amounts are not being stated at this time. Applicants should propose funding amounts in their proposals based on their best estimate of the cost of providing the services described in these specifications.

Funding source: State General Fund

Period of availability: The term of the contract shall not exceed two (2) years, from July 1, 2009, to June 30, 2011, subject to the appropriation and availability of funds and satisfactory contract performance.

**2.3.2 General Requirements**

**A. Specific qualifications or requirements, including but not limited to licensure or accreditation**

1. The applicant shall have licenses and certificates, as applicable, in accordance with federal, state and county regulations, and comply with all applicable Hawaii Administrative Rules.
2. The applicant must have demonstrated its competence or qualifications to perform the required services and shall have a minimum one year experience in the provision of services.
3. The applicant must have an accounting system, with acceptable accounting practices and standards.
4. The proposed service must meet all required state licensing or certification standards, provide assurances of fair hearing and grievance procedures for clientele, civil rights compliance, information safeguarding practices, and provide proof of insurance coverages as applicable.
5. The applicant shall submit in a timely manner upon request by the Judiciary, any additional information needed by the Judiciary to make a decision on the applicant's proposal. The Judiciary may request an oral discussion or presentation in support of the proposal. On-site visits may be made.
6. The applicant shall comply with the Chapter 103F, HRS Cost Principles for Purchases of Health and Human Services identified in SPO-H-201 (Effective 10/01/98), which can be found on the SPO website (see Section 5, POS Application Checklist, for the website address).

**B. Secondary purchaser participation**  
(Refer to §3-143-608, HAR)

After-the-fact secondary purchases will be allowed.

**C. Multiple or alternate proposals**  
(Refer to §3-143-605, HAR)

☐ Allowed                      ☒ Unallowed

**D. Single or multiple contracts to be awarded**  
(Refer to §3-143-206, HAR)

☐ Single                      ☐ Multiple                      ☒ Single & Multiple

Multiple contracts may be awarded if such awards are deemed to be in the best interests of the Judiciary, and will be based on the highest ranked proposals.

**E. Single or multi-term contracts to be awarded**  
(Refer to §3-149-302, HAR)

☒ Single term (< 2 yrs)                      ☐ Multi-term (> 2 yrs.)

A single term contract will be awarded for two (2) years, from July 1, 2009, to June 30, 2011.

**F. RFP contact persons**

The individuals listed below are the points of contact from the date of release of this RFP until the selection of the winning provider or providers. Written questions should be submitted to the RFP contact person(s) and received on or before the day and time specified in Section \_\_\_\_ (Procurement Timetable) of this RFP.

If you have any technical questions regarding the requested services, please contact the following individual:

Judiciary Contracts & Purchasing Office  
Naty Butay at (808) 538-5805                      Fax: 538-5802  
Email: [Naty.B.Butay@courts.state.hi.us](mailto:Naty.B.Butay@courts.state.hi.us)

If you have any programmatic questions regarding the requested services, please contact the following individual:

Maui:                      Family Court, Second Circuit  
Judy Kawano at (808) 244-2792                      Fax: 244-2870  
Email: [Judy.R.Kawano@courts.state.hi.us](mailto:Judy.R.Kawano@courts.state.hi.us)

**2.3.3. Scope of Work**

The scope of work encompasses the following tasks and responsibilities:

**A. Service Activities (Minimum and/or mandatory tasks and responsibilities)**

Services are being requested for a residential facility for youth who require a safe, monitored, and structured living environment.

Specific needs include but are not limited to:

1. Services for adjudicated minors who require residential placement with minimal supervision. Services are to include psycho-social assessment and evaluation, psycho-education training to counseling and training designed to prepare the older adolescent for self-sufficiency and independence, survival skills, personal skills, recreational activities, transportation, basic household and money management, employment and related skills.
2. Services for adjudicated minors who require a highly structured residential placement to address chronic emotional and behavioral problems. Services are to include counseling and interventions to improve or enhance social, personal, or problem solving skills, counseling and interventions to increase self-discipline, responsibility and self control.

Applicants may submit proposals to do one or all of the above services.

**B. Management Requirements (Minimum and/or mandatory requirements)**

**1. Personnel**

- a. The applicant shall possess and document knowledge, capacity, skills and experience in working with the targeted population.
- b. The applicant shall conduct a criminal history record check for any person, including but not limited to any officer, employee, volunteer, or subcontractor who performs work or services which necessitates close proximity to adult or juvenile clients, or other program related adolescents or children. At a minimum, applicants will search [www.ecrimhawaii.gov](http://www.ecrimhawaii.gov) (Adult Criminal Conviction Information System, Hawaii Criminal Justice Data Center) and [www.nsopr.gov](http://www.nsopr.gov) (National Sex Offender Public Registry). For persons working in positions which necessitate close proximity to children or adolescents, the criminal history check shall include a national criminal history database check which may require fingerprinting. The minimum record check will be conducted once every four years for each person, and/or at the outset of the contract period if such checks have never been conducted. Results of all criminal record inquiries conducted shall be placed in the employee's or volunteer's personnel file and shall be available to the Judiciary for review.
- c. The applicant shall have on the premises at least one person currently certified in First Aid and CPR.

- d. The staff and volunteers, if used by the applicant, shall be under the supervision of the program director or his or her designee and shall, accordingly, be trained in client confidentiality issues and program quality assurance requirements.
- e. The applicant must have sufficient and relevant training and staff development.

**2. Administrative**

The applicant shall establish and implement policies and procedures which clearly identify the target population for each type of service, the program content, and methods of service delivery.

**3. Quality assurance and evaluation specifications**

- a. The applicant shall have a quality assurance plan which identifies the mission of the organization, what services will be provided, how they are delivered, who is qualified to deliver the services, who is eligible to receive the services, and what standards are used to assess or evaluate the quality and utilization of services.
- b. Program evaluation should reflect the documentation of the achievement of the stated goals, using tools and measures consistent with the professional standards of the disciplines involved in the delivery of services.

**4. Output and performance/outcome measurements**

- a. Output: The applicant shall record unduplicated clients served. The unduplicated client count shall be recorded in the applicant's quarterly reports, culminating in a final unduplicated client count on the applicant's final report.
- b. Outcome: The applicant shall propose measurement tools by which effectiveness of the services may be determined, as well as utilize any provided by the Judiciary.

**5. Reporting requirements for program and fiscal data**

- a. The provider shall submit written quarterly and year-end reports summarizing output and outcome data, performance accomplishments, challenges, and actual expenditures. Quarterly reports are due 30 days after the end of the quarter. Final reports are due 45 days after the end of each fiscal year and/or at the end of the contract period, as applicable.

- b. Reports shall consist of a statement by the provider relating to the work accomplished during the reporting period and shall include statements of the nature of the work performed, identification of persons served by the provider during the reporting period, identification of any immediate problems encountered during the reporting period, and any recommendations deemed pertinent by the provider, as well as a statement of what activities are proposed to be accomplished during the next reporting period. In addition to the written progress reports, the provider, upon request, shall be required to meet with representatives of the Judiciary to discuss the progress of the work required.
- c. The provider shall, at the completion of the contract period, submit a final written report to the Judiciary. The report shall include documentation of the provider's overall effort towards meeting the program goals and objectives. Furthermore, the provider shall furnish any additional reports or information that the Judiciary may from time to time require or request.

**6. Pricing or pricing methodology to be used**

Negotiated unit of service.

**7. Units of service and unit rate**

Estimated number of units of service:

Maui: 2 bed spaces per day



**2.4 SVC SPEC TITLE: Drug Court Services, Second Circuit  
DR2MDC - Adult Substance Abuse Treatment Services**

Meeting Notice: The tentative specifications below are for client services for the Maui Drug Court Program for the Second Circuit. Should you be interested in more information and discussion regarding the tentative specifications for service delivery, a meeting will be held on **Friday, October 17, 2008 at 9:00 a.m. in Courtroom 2, Hoapili Hale, 2145 Main Street, Wailuku, Hawaii. Please contact Gail Nakamae, Program Specialist, at 808-244-2871 if you are planning to attend.** Your comments and input on any aspect of the specifications (e.g. objectives, target group, services, and cost) are welcome.

**2.4.1 Introduction**

**A. & B. - (SEE SECTION 2.0.1)**

**C. Description of the goals of the service**

To provide a continuum of adult substance abuse treatment services, delivered in the drug court treatment modality, to male and female felony offenders with drug and/or drug and alcohol related problems who are voluntarily participating in the Maui Drug Court (MDC) Program in the Second Circuit Court, State of Hawaii. The goal of this treatment and compliance monitoring is to provide offenders with the skills and knowledge to effectively deal with their use of drugs and/or drugs and alcohol in order to eliminate their recidivism to criminal behavior.

**D. Description of the target population to be served**

Non-violent adult men and women (ages 18 and older) with drug and/or drug and alcohol related problems who are facing charges, are charged with, or are on probation, parole or furlough for felony offense(s), voluntarily participating in the MDC Program in the Second Circuit Court, State of Hawaii. The approximate static number of clients anticipated to be serviced on the island of Maui as specified by this RFP is a static client population of approximately sixty (60) to one hundred twenty (120) clients in each of the two State fiscal years covered by this RFP.

**E. Geographic coverage of service**

Second Circuit –Island of Maui

**F. Probable funding amounts, source, and period of availability**

Funding source: State general funds, funds provided or secured by the County of Maui

Other potential funding sources: Federal funds, public and private grants.

Probable funding amounts:

FY 2010      FY 2011

Unspecified general funds and funds provided or secured by the County of Maui.

Period of availability: The term of the contract shall not exceed two (2) years, from July 1, 2009 to June 30, 2011, subject to the appropriation and availability of funds and satisfactory contract performance. All State and County funds are contingent on appropriation.

NOTE: Funding amounts are not being stated at this time. Applicants should propose funding amounts in their proposals based on their best estimate of the cost of providing the services described in these specifications.

## **2.4.2 General Requirements**

### **A. Specific qualifications or requirements, including but not limited to licensure or accreditation**

1. The applicant shall have licenses and certificates, as applicable, in accordance with federal, state and county regulations, and comply with all applicable Hawaii Administrative Rules.
  - a. Residential programs, in accordance with Title 11, Chapter 98, Special Treatment Facility, must have a Special Treatment Facility license at the time of application and abide by applicable administrative rules governing accreditation of substance abuse treatment programs.
  - b. Unless otherwise specified in this RFP, therapeutic living programs must meet the Department of Health, Alcohol and Drug Abuse Division's (ADAD) Therapeutic Living Program Requirements as specified in the Division's RFP Number HTH 440-08-1 for Substance Abuse Treatment Services until applicable administrative and licensing rules are implemented by the Department of Health. Upon implementation of duly authorized administrative and licensing rules, programs must comply accordingly.
  - c. All applicants shall comply with Title 11, Chapter 175, Mental Health and Substance Abuse System.
  - d. The proposed service must meet all required state licensing or certification standards, provide assurances of fair hearing and

grievance procedures for clientele, civil rights compliance, information safeguarding practices, and provide proof of insurance coverages and identification as applicable.

2. The applicant must have an accounting system, with acceptable accounting practices and standards.
3. The applicant shall submit in a timely manner upon request by the Judiciary, any additional information needed by the Judiciary to make a decision on the applicant's proposal. The Judiciary may request an oral discussion or presentation in support of the proposal. On-site visits may be made.
4. The applicant shall comply with the Chapter 103F, HRS Cost Principles for Purchases of Health and Human Services identified in SPO-H-201 (Effective 10/01/98), which can be found on the SPO website (See Section Five, Proposal Application Checklist, for the website address).

**B. Secondary purchaser participation**

(Refer to §3-143-608, HAR)

After-the-fact secondary purchases will be allowed.

**C. Multiple or alternate proposals**

(Refer to §3-143-605, HAR)

☐ Allowed                      ☒ Unallowed

**D. Single or multiple contracts to be awarded**

(Refer to §3-143-206, HAR)

☐ Single                      ☐ Multiple ☒ Single & Multiple

Multiple contracts may be awarded if such awards are deemed to be in the best interest of the Judiciary, and will be based on the highest ranked proposals.

**E. Single or multi-term contracts to be awarded**

(Refer to §3-149-302, HAR)

☒ Single term (< 2 yrs)                      ☐ Multi-term (> 2 yrs.)

A single term contract will be awarded for two (2) years, from July 1, 2009 to June 30, 2011.

**F. RFP contact persons**

The individuals listed below are the points of contact from the date of release of this RFP until the selection of the winning provider or providers. Written questions should be submitted to the RFP contact person(s) and received on or before the day and time specified in Section \_\_\_\_ (Procurement Timetable) of this RFP.

If you have any technical questions regarding the RFP process, please call the following individual:

Naty Butay, Contracts and Purchasing Office  
Phone: (808) 538-5805 Fax: (808) 538-5802  
Email: [naty.b.butay@courts.state.hi.us](mailto:naty.b.butay@courts.state.hi.us)

If you have any programmatic questions regarding the requested services, please call the following individual:

Gail Nakamae, Program Specialist, Second Circuit  
Phone: (808) 244-2871 Fax: (808) 244-2870  
Email: [gail.k.nakamae@courts.state.hi.us](mailto:gail.k.nakamae@courts.state.hi.us)

### **2.4.3 Scope of Work**

**Applicants may propose to provide the whole continuum of services or only a part of the continuum, i.e. In-Custody Substance Abuse/Chemical Dependency Services, In-Community Substance Abuse/Chemical Dependency Services (assessments, outpatient, and intensive outpatient treatment), Residential Substance Abuse/Chemical Dependency Services (residential substance abuse treatment, therapeutic living, and sober housing services.) Applicants must clearly state the specific service activities they are proposing to provide. Proposals shall demonstrate a clear understanding and knowledge of the community's needs (cultural, social, physical, etc.) and available resources.**

**NOTE: Proposals will be evaluated by service activity according to Section Four of this RFP and will be scored and ranked separately within the following categories: In-Custody Substance Abuse/Chemical Dependency Services, In-Community Substance Abuse/Chemical Dependency Services, and Residential Substance Abuse/Chemical Dependency Services.**

The scope of work encompasses the following tasks and responsibilities:

#### **A. Service Activities (Minimum and/or mandatory tasks and responsibilities)**

To provide a continuum of evidence-based, offender-oriented substance abuse treatment services, delivered in the drug court treatment modality, to adult male

and female felony offenders with drug and/or drug and alcohol related problems who are voluntarily participating in the MDC Program in the Second Circuit Court, State of Hawaii. Evidence-based practices are defined as a body of contemporaneous empirical research findings that produce the most efficacious outcomes for clients, has literature to support the practices, is supported by national consensus, has a system for implementing and maintaining program integrity, and conformance to ethical/professional standards. As detailed below, services to be available for clients shall include substance abuse/chemical dependency treatment while incarcerated and in the community, Residential Substance Abuse/Chemical Dependency Treatment, Therapeutic Living Programs, and Sober Housing as needed. (The continuing care component shall be the responsibility of the MDC Program and is not a required service activity under this specification.) In addition, treatment shall involve compliance monitoring including frequent drug and alcohol testing, screening and admission services, and status reporting to the drug court. Support services with the goal of relapse prevention shall also be provided. The goal of this treatment and compliance monitoring is to provide offenders with the skills and knowledge to effectively deal with their use of drugs and/or drugs and alcohol in order to eliminate their recidivism to criminal behavior.

**1. In-Custody Substance Abuse/Chemical Dependency Services:**

Through a collaboration between the Judiciary-MDC, the County of Maui and the Department of Public Safety-Maui Community Correctional Center (MCCC), substance abuse treatment/chemical dependency services are to be provided to MDC referred participants while incarcerated at the MCCC. The MDC In-Custody Treatment Program (ICTP) is a minimum ninety (90) day program intended to provide assessment and evaluation, substance abuse/chemical dependency treatment, and linkages to transition services for inmates from Maui, Molokai or Lanai who are incarcerated at MCCC and who have been screened and referred by the MDC as appropriate for the program. These inmates are participating in the pretreatment (awaiting formal admission) or court-supervised (post admission) components of the MDC program. Participants are housed separately from the general population of MCCC inmates in two dorms: Dorm 3 houses up to twenty (20) males and Dorm 5 has a capacity of up to twelve (12) beds for women.

The partner agencies in this collaborative effort shall provide oversight and direction with regard to the service delivery of the MDC ICTP, including curricula, methodology of the treatment provided and other program activities. Further, the partner agencies shall review and approve the appropriateness of the service delivery prior to program implementation. Service delivery for the MDC ITCP shall be provided as follows:

- a. **Assessment/Evaluation:** shall utilize the American Society of Addiction Medicine (ASAM) criteria, and the Diagnostic Statistical Manual of Mental Disorders (DSM IV.) Utilizing the information provided via external sources (i.e. employer, court system, probation, family) and through the completion and interpretation of information collected through a structured interview process, a determination shall be made regarding the extent of chemical dependency, abuse, experimentation, or the lack of such conditions. Assessments will take into consideration client history of substance use; bio-medical conditions and complications; emotional, behavioral or cognitive conditions and complications; readiness to change, relapse, continued use or continued problem potential and recovery/living environment. These factors are considered along with the diagnostic criteria found in the DSM IV, and the six dimensions provided by the ASAM to make the determination regarding the client's substance use and to provide recommendations. Based on the assessment findings, a level of substance abuse/chemical dependency education or treatment most appropriate for the individual's needs at that time may be recommended.
- b. **Program Structure:** A minimum of twenty-one (21) hours of face-to-face activities per week shall be provided, including at least one (1) hour of individual counseling to be conducted with each client. Program structure shall include the capability to conduct assessments and evaluation of treatment need, treatment planning, and provide treatment that is comprised of individual and group counseling coupled with psycho-educational training which addresses drug and alcohol education, understanding criminal behavior, anger and stress management, social and lifestyle skills development and relapse/recidivism prevention. Linkages to transition services shall also be provided. Offenders will be trained in treatment sessions to identify antisocial thinking, attitudes, behaviors and beliefs; to recognize high-risk situations, places and people surrounding AOD use; and practice how to deal with them in a pro-social manner. Treatment shall take into consideration the psycho-social needs of the client, shall be cognitive and behavioral in approach and shall incorporate a cognitive-behavioral curriculum that addresses the interaction of criminal thinking and substance abuse/chemical dependency using a group treatment format. Applicants shall provide a detailed description of the model to be used within a ninety (90) day program, including the philosophical basis for treatment and for dealing with incarcerated inmates who have a history of substance abuse/chemical dependency.

- c. **Drug Testing:** Random and observed urinalysis shall be administered throughout the duration of the program at a minimum of once weekly per client and as needed.
- d. **Collaboration with Partners:** Regular and open communication shall be maintained between the prospective provider and the partner agencies based on a commonality of goals in the spirit of mutual support and collaboration.

2. **In-Community Substance Abuse/ Services:**

In-community substance abuse/chemical dependency services shall consist of the following services (defined below) to be delivered in the drug court treatment modality to adult clients in an approximate 15-month drug court program (**Please refer to Table of Recommended Minimum Services Per Week For In-Community Substance Abuse/Chemical Dependency Services as a guideline for service provision**):

- a. **Assessment/Evaluation:** Provides an initial assessment of the client which shall utilize the American Society of Addiction Medicine (ASAM) criteria, and the Diagnostic Statistical Manual of Mental Disorders (DSM IV). Utilizing the information provided via external sources (i.e. employer, court system, probation, family) and through the completion and interpretation of information collected through a structured interview process, a determination shall be made regarding the extent of chemical dependency, abuse, experimentation, or the lack of such conditions. Assessments will take into consideration client history of substance use; bio-medical conditions and complications; emotional, behavioral or cognitive conditions and complications; readiness to change, relapse, continued use or continued problem potential and recovery/living environment. These factors are considered along with the diagnostic criteria found in the DSM IV, and the six dimensions provided by the ASAM to make the determination regarding the client's substance use and to provide recommendations. Based on the assessment findings, a level of substance abuse/chemical dependency education or treatment most appropriate for the individual's needs at that time may be recommended. The assessment/evaluation intervention will be conducted for approximately two (2) weeks post-referral and provides for approximately five (5) hours of face-to-face treatment services per week to include individual and group counseling.
- b. **Outpatient Treatment:** Provides non-residential comprehensive specialized services on a scheduled basis for individuals with

substance abuse/chemical dependency issues. Professionally directed evaluation, treatment, and recovery services shall be provided to clients appropriate for a lower level of substance abuse/chemical dependency related services than would be found in a residential or day treatment program, for a minimum of one (1) hour up to a maximum of eight (8) hours per client per week of face-to-face treatment, including at least one (1) hour per month of individual counseling.

- c. **Intensive Outpatient Treatment:** Provides non-residential specialized intensive services on a scheduled basis for individuals with substance abuse problems. Such treatment services usually operate for at least three (3) or more hours per day for three (3) or more days per week. Services may include individual and group counseling, medication management, family therapy, educational groups, occupational and recreational therapy, and other therapies. Professionally directed evaluation, treatment, and recovery services shall be provided, for a minimum of nine (9) hours up to a maximum of nineteen (19) hours per client per week of face-to-face treatment, including at least one (1) hour per week of individual counseling.
- d. **Drug Testing:** Applicants must have the capability to provide frequent drug and alcohol testing. Drug testing shall include random and observed breath, urine, and hair analysis for all active MDC clients who are receiving or who have received treatment from the selected provider for In-Community Substance Abuse/Chemical Dependency Services as specified in this RFP, including those receiving continuing care services (minimum of 12 weeks) from the MDC.
- e. **Friends and Family Groups:** Psycho-educational sessions shall be provided for all MDC program participant friends/families and for all MDC clients who have completed Phases A - C. Fifty percent (50%) of the time allocated to these sessions shall be focused on educational curricula with the remaining fifty percent (50%) of the time spent on process goals.
- f. **Program Structure:** Applicants must have the capability to conduct assessments and evaluation of treatment need, treatment planning, and to provide treatment that is comprised of individual, group, family counseling coupled with psycho-educational training which addresses drug and alcohol education, understanding criminal behavior, anger and stress management, social and lifestyle skills development and relapse/recidivism prevention.



Offenders will be trained in treatment sessions to identify antisocial thinking, attitudes, behaviors and beliefs; to recognize high-risk situations, places and people surrounding AOD use; and practice how to deal with them in a pro-social manner. Treatment shall take into consideration the psycho-social needs of the client, shall be cognitive and behavioral in approach, and shall incorporate a cognitive-behavioral curriculum that addresses the interaction of criminal thinking and substance abuse/chemical dependency using a group treatment format. Programs shall develop and implement appropriate transition plans for each client in the final phases of treatment and prior to entry into continuing care. The plan shall address transition and recovery issues and relapse/recidivism prevention. Applicants shall provide a detailed description of the model to be used within a drug court program, including the philosophical basis for treatment and for dealing with criminal offenders with a history of substance abuse/chemical dependency. (Note: An available curriculum to consider is the Criminal Conduct and Substance Abuse Treatment by Kenneth W. Wanberg, Ph.D. and Harvey B. Milkman, Ph.D. Other comparable evidence-based models that could be delivered in accordance to the service matrix as detailed in the **Table of Recommended Minimum Services Per Week For In-Community Substance Abuse/Chemical Dependency Services** may also be considered.)

### 3 Residential Substance Abuse Services

- a. **Residential:** Provides a planned regimen of professionally directed evaluation, treatment, case management, and other ancillary and special services. Observation, monitoring and treatment are available 24 hours a day, seven days a week. A minimum of twenty-four (24) hours per week of face-to-face treatment shall be provided, including a minimum of one (1) hour per week of individual counseling to be scheduled with each client. Other services shall include but are not limited to group counseling, education, skill building, recreational therapy, and family services. Program structure shall include the capability to conduct assessments and evaluation of treatment need, treatment planning, case management, treatment that is comprised of individual, group, family and vocational/educational counseling coupled with psycho-educational training which addresses drug and alcohol education, understanding criminal behavior, anger and stress management, social and lifestyle skills development and relapse/recidivism prevention. Offenders will be trained in treatment sessions to identify antisocial thinking, attitudes, behaviors and beliefs; to recognize high-risk situations, places and

people surrounding AOD use; and practice how to deal with them in a pro-social manner. Treatment shall take into consideration the psycho-social needs of the client and shall be cognitive and behavioral in approach, and shall incorporate a cognitive-behavioral curriculum that addresses the interaction of criminal thinking and substance abuse/chemical dependency using a group treatment format. Applicants shall provide a detailed description of the model to be used within a drug court program, including the philosophical basis for treatment and for dealing with criminal offenders with a history of substance abuse/chemical dependency. Programs shall develop and implement appropriate transition plans for each client in the final phases of treatment. The plan shall address transition and recovery issues and relapse/recidivism prevention.

- b. **Therapeutic Living:** Provides a less structured residential setting than that of a special treatment facility for those persons recovering from substance abuse. The program shall aid residents in meeting basic needs and provide supportive services through an individualized recovery and discharge plan. The categories of Therapeutic Living Programs are as follows:

- 1) **Transitional Living Programs for Adults**

These programs provide residential living to residents who are currently receiving substance abuse treatment in a day or outpatient program or have been clinically discharged from treatment yet still are in need of supervision and a clean and sober living environment. All residents in the same transitional residential living program house shall be adults of the same gender. At a minimum, one direct services staff member with a current first aid certificate and CPR training shall be present in the program when residents are present. For non-therapeutic program hours, the program shall have sufficient staff, as approved by the department, to ensure the safety, health, and delivery of the services. A minimum of fifteen (15) hours per week of face-to-face supportive psycho-social services shall be provided to each resident each week.

- 2) **Transitional Living Programs for Parents with Children**

These programs provide residential living services to residents who are currently receiving substance abuse treatment in a day or outpatient program, or who have been clinically discharged from treatment yet still need

the program shall have sufficient staff, as approved by the department, to ensure the safety, health, and delivery of the services. A minimum of fifteen (15) hours per week of face-to-face supportive psycho-social services shall be provided to each resident each week.

2) **Transitional Living Programs for Parents with Children**

These programs provide residential living services to residents who are currently receiving substance abuse treatment in a day or outpatient program, or who have been clinically discharged from treatment yet still need supervision and a clean and sober living environment. All residents in the program shall be pregnant women or women with child(ren) or men with child(ren). All adults in the same transitional residential living program house shall be of the same gender. Staff shall be onsite twenty-four (24) hours per day, seven (7) days per week. For non-therapeutic program hours, the program shall have sufficient staff, as approved by the Department of Health, to ensure the safety, health, and delivery of services. A minimum of fifteen (15) hours per week of face-to-face supportive psycho-social services shall be provided to each resident each week.

3) **Semi-supervised, independent but structured living arrangements for adults**

These programs provide a structured living arrangement for adults who need minimum professional or paraprofessional support in order to live in the community and avoid a deterioration in functioning and a more restrictive level of care. Staff must be on site a minimum of twelve (12) hours per day, and on call for twenty-four (24) hours per day, seven (7) days per week. At a minimum, one staff member shall be available for every fifteen (15) residents. All residents in the housing unit shall be adults of the same gender.

Further requirements are:

- a) At least ten (10) hours a week of case management shall be provided to assist residents in independent living skills.
- b) The program shall maintain scheduled services to facilitate accessibility to and attendance at

employment, self-help groups, counseling, and vocational counseling.

- c) The program shall provide or arrange for educational services appropriate to the level of functioning and comprehension of the resident.
  - d) The program shall provide residents with information about community resources and assist them in accessing those resources.
  - e) The program shall facilitate peer group support and provide supervision in daily living skills and work.
- c. **Sober Housing:** Provides for sober living environment as part of transitional planning for recovering individuals who generally have completed appropriate substance abuse treatment services and who require a supportive, alcohol and drug-free residence that will reinforce sober and responsible behavior. Generally, sober houses are democratically managed and self-supporting, with limited, short-term Judiciary funding provided for eligible clients' rental fees and/or other program operations.
- d. **Drug Testing:** Random and observed breath and urine testing shall be administered in all residential programs described above with the exception of sober housing.

**TABLE OF RECOMMENDED  
MINIMUM SERVICES PER  
WEEK FOR IN-COMMUNITY  
SUBSTANCE  
ABUSE/CHEMICAL  
DEPENDENCY SERVICES**

	<b>Individual Counseling</b>	<b>Group Counseling</b>	<b>Alcohol and/or Urinalysis</b>	<b>APPROXIMATE TOTAL HOURS PER WEEK</b>
<b>PRE-ADMISSION:</b>				
ASSESSMENT/ EVALUATION “Intensive Outpatient Treatment” (2 weeks)				
	1 session (1.0 hr.)	4 sessions (2.0 hrs. each)	5	9.0
<b>POST-ADMISSION:</b>				
PHASE A “Intensive Outpatient” (12 weeks minimum)				
	1 session (1.0 hr.)	4 sessions (2.0 hrs. each)	1	9.0
PHASE B “Outpatient Treatment” (14 weeks minimum)				
	1 session (1.0 hr.)	2 sessions (2 hrs. each) 1 session (1.5 hrs. each)	1	6.5
PHASE C “Outpatient Treatment” (10 weeks minimum)				
	1 session (1.0 hr.)	1 session (2.5 hrs. each)	1	3.5

Note:                   -Phase durations are approximate.  
                               -Individual sessions may be with the individual client alone and/or with the  
                               individual client and his/her family/support members.

-In addition to above service provision, applicant must also provide family group psycho-educational counseling services as indicated in Section A.2.e. to all program participant friends/families and those MDC clients that have completed Phases A-C.

-Drug testing services shall be provided for all clients who are receiving or who have received treatment from the applicant, including those participating in continuing care services (minimum 12 weeks) from the MDC. A maximum of two (2) drug hair testings shall also be administered per client.

-Matrix of services may be modified as needed.

#### **Other Requirements Relating to Service Activities:**

4. For service activities requiring drug testing, the testing materials, training and monitoring of service quality shall be provided by the applicant. Drug testing services are to be provided in accordance with best practices. Additional consideration shall be given to applicants with the capability of administering drug testing through a variety of methodologies. The applicant's proposal shall clearly identify the drug testing methodologies to be utilized and the reason for the selection of the specific methodologies, including all supportive information. Procedures/protocol relevant to the frequency and application of the drug and alcohol testing shall also be described by the applicant.
5. Applicants proposing to provide In-Custody, Outpatient, Intensive Outpatient and Residential substance abuse/chemical dependency treatment services, shall delineate the following in their applications
  - a. Identification and brief description of the distinguishing highlights for the evidence-based treatment model(s) to be used.
  - b. Justification for the selection of the evidence-based treatment model(s).
  - c. Identification of assessment instrument(s) to be used; the purpose of the instruments; and how the instruments will be implemented.
  - d. For Residential substance abuse treatment programs, the length of time the client will be involved in structured activities per twenty-four (24) hours.
  - e. Identification of training(s) to be provided to staff; the frequency of the training(s); and supervisory oversight for quality assurance.
  - f. Identification, description and references for the curriculum to be used.
  - g. Identification of the program targets for change.
  - h. Identification of the program's completion criteria for the clinical discharge of the client.
  - i. Identification of the program's termination or discharge criteria.
  - j. Identification and description of a quality assurance program that involves client care and the delivery of services, the personnel who will implement the evaluation and review, and the procedures for corrective actions for problems identified.
6. Clients in any level of treatment shall meet the most current version of the American Society for Addiction Medicine Patient Placement Criteria (ASAM-PPC 2R) for admission, continuance and discharge.

7. Experience working with drug courts or in providing treatment and/or other appropriate services to criminal justice clients is preferred.
8. Additional consideration shall be given to applicants that have a minimum of one year experience in the provision of substance abuse treatment services or in the provision of Therapeutic Living (Supportive Living) services for substance abuse clients. For those applicants that do not have a minimum of one year experience in substance abuse treatment or Therapeutic Living services, qualifications and other supportive information shall be detailed relevant to the applicant's competence to perform the required services.
9. Additional consideration shall be given to applicants with the capability to provide the following services:
  - Psychological/Psychiatric Evaluations
  - Medication Monitoring
10. Frequent status reporting to the drug court (in writing and in person) is also required. For example, written progress reports on each client's performance (e.g., drug testing results, counseling and meeting attendance, etc.) and recommended action must be provided prior to every drug court hearing; also, the provider is required to participate in weekly meetings with the judge and other members of the MDC Team to discuss all clients on the calendar for the next drug court hearing, any offenders applying for admission, any offenders to be invited for admission, and any other issues. Additionally, the provider must provide frequently updated statistics, including narratives, graphs and charts, on client demographics (e.g., age, race, drug of choice, drug use onset, prior treatment, prior convictions, pending offenses, employment, housing, etc.) and program outcomes (e.g., drug testing results, sanctions imposed, etc.).
11. Applicants must provide a description as to how they will work collaboratively with the Judiciary and other partner agencies in a team approach to service delivery and program development.
12. Applicants will demonstrate compliance with the State Department of Health, ADAD rules and regulations for the provision of treatment.

NOTE: Because ADAD may not have promulgated rules and regulations with respect to the provision of the services requested in this RFP, the evaluation of any applicant's conformity to this RFP may consider definitional information and description of services set forth in ADAD RFP Number HTH 440-08-1 for Substance Abuse Treatment Services.

## **B. Management Requirements (Minimum and/or mandatory requirements)**



**1. Personnel**

- a. The applicant shall possess and document knowledge, capacity, skills and experience in working with the targeted population. Applicants shall provide its minimum qualifications for program director(s). Program director is defined as the person responsible for the overall management of the treatment program(s). Applicant shall provide educational backgrounds and experience of any current program director(s).

At a minimum, applicants shall ensure that clinical supervision over treatment activities is provided by substance abuse counselors or program administrators certified pursuant to Section 321-193 (10), Hawaii Revised Statutes; or hold an advanced degree in behavioral health science, with at least one year experience working in the field of substance abuse addiction.

CSACs and individuals who hold an advanced degree in behavioral health services preferably shall perform clinical evaluation, treatment planning and individual, group and family counseling; however, non CSACs or non-master's level providers may be utilized as long as they are directly supervised by a CSAC or master's level counselor, and are working toward certification.

Facilitators of the family psycho-educational groups shall hold an advanced degree in family therapy or other related behavioral health services.

- b. Therapeutic Living Program service activities shall be provided by staff knowledgeable in substance abuse problems and experience in case management. All direct service staff shall be familiar with substance abuse and recovery issues. The staff shall also be familiar with practices including knowledge of relapse prevention, vocational rehabilitation, case management, life skills, and community resources.
- c. The applicant shall conduct a criminal history record check for any person including, but not limited to any officer, employee, volunteer or subcontractor, who performs work or services which necessitates close proximity to adult or juvenile clients or other program related adolescents or children. At a minimum, applicants will search [www.ecrim.hawaii.gov](http://www.ecrim.hawaii.gov) (**Adult Criminal Conviction Information System, Hawaii Criminal Justice Data Center and** [www.nsopr.gov](http://www.nsopr.gov) (**National Sex Offender Public Registry.**) For persons working in positions which necessitate close proximity to

children or adolescents, the criminal history record check shall include a national criminal history database check which may require fingerprinting. The minimum record check will be conducted once every four years for each person, and/or at the outset of the contract period if such checks have never been conducted. Results of all criminal history record inquiries conducted shall be placed in the employee's or volunteer's personnel file and shall be available to the Judiciary for review.

- d. The applicant shall conduct Child Protective Services central registry checks on any administrative and program staff and volunteers working in positions which necessitate close proximity to children or adolescents.
- e. The applicant shall have on the premises at least one person currently certified in First Aid and CPR except for sober housing services.
- f. The staff and volunteers, if used by the applicant, shall be under the supervision of the program director or his or her designee and shall, accordingly, be trained in client confidentiality issues and program quality assurance requirements.
- g. The applicant must have sufficient and relevant staff training and development. All direct service staff shall have training in and be familiar with current procedures and practices, intake, admission, and referral of residents.
- h. The applicant shall ensure that staff receive appropriate supervision including clinical supervision and administrative direction.

## **2. Administrative**

- a. The applicant shall establish and implement policies and procedures which clearly identify the target population for each type of service, the program content, and methods of service delivery.
- b. Court appearances and/or testimony shall be provided as needed.

## **3. Quality assurance and evaluation specifications**

- a. The applicant shall have a quality assurance plan which identifies mission of the organization, what services will be provided, how they are delivered, who is qualified to deliver the services, who is eligible to receive the services, and what

standards are used to assess or evaluate the quality and utilization of services.

- b. Program evaluation should reflect the documentation of the achievement of the stated goals, using tools and measures consistent with the professional standards of the disciplines involved in the delivery of services.
- c. The applicant shall agree by contract, to be willing to undergo a program assessment and audit as designated by the contracting agency. Based on the assessment/audit report, the vendor will develop in concert with the contracting agency, an action plan to address deficiencies.

**4. Output and performance/outcome measurements**

- a. Output: The applicant shall record unduplicated clients served. The unduplicated client count shall be recorded in the applicant's quarterly reports, culminating in a final unduplicated client count on the applicant's final report.
- b. Outcome: The applicant shall propose measurement tools by which effectiveness of the services may be determined, as well as utilize any provided by the Judiciary.

**5. Coordination of service**

- a. Applicants shall describe their ability to collaborate with other appropriate services, including, but not limited to, health, mental health, social, educational, vocational rehabilitation and employment services.
- b. Applicants intending to provide only part of the continuum shall also have and document appropriate linkages to other services in the continuum.

**6. Reporting requirements for program and fiscal data**

- a. The applicant shall submit written quarterly and year-end reports summarizing output and outcome data, performance accomplishments, challenges, and actual expenditures. Quarterly reports are due 30 days after the end of the quarter. Final reports are due 45 days after the end of each fiscal year and/or at the end of the contract period, as applicable.

- b. Reports shall consist of a statement by the applicant relating to the work accomplished during the reporting period and shall include statements of the nature of the work performed, identification of persons served by the applicant during the reporting period, identification of any immediate problems encountered during the reporting period, and any recommendations deemed pertinent by the applicant, as well as a statement of what activities are proposed to be accomplished during the next reporting period. In addition to the written progress reports, the applicant, upon request, shall be required to meet with representatives of the Judiciary to discuss the progress of the work required.
- c. Pursuant to HRS 601-21, the applicant shall comply with the requirements of the statewide substance abuse treatment monitoring program established under HRS 321-192.5. The Judiciary additionally requires that all programs which provide substance abuse treatment services, whether accredited or not accredited by ADAD, participate in the statewide data collection activities under the purview of ADAD. The applicant shall also include criteria established by the department of health pursuant to section 321-A, to determine whether the treatment applicant is achieving success in treating individuals with substance abuse.
- d. The applicant shall, at the completion of the contract period, submit a final written report to the Judiciary. The report shall include documentation of the applicant's overall effort towards meeting the program goals and objectives. Furthermore, the applicant shall furnish any additional reports or information that the Judiciary may from time to time require or request.

**7. Pricing or pricing methodology to be used**

The applicant may submit a proposal based on a "Negotiated Unit of Service" pricing methodology and/or a "Fixed Price" pricing methodology, as further described in SECTION THREE of this RFP.

**8. Units of service and unit rate**

- a. Applicant's proposal shall be based on a "Negotiated Unit of Service" and/or "Fixed Rate" pricing methodology. For either pricing methodology proposed, applicant's proposal

should reference average expected lengths of treatment proposed in each category and provide fees for units of services as follows:

<u><b>Service Activity:</b></u>	<u><b>Unit of Service:</b></u>
<u><b>In-Custody Services:</b></u>	
Assessment/Evaluation	Per Hour/Session
Individual and Group	Per Hour/Session
<u><b>In Community Services:</b></u>	
Assessment/Evaluation	Per Hour/Session
Intensive Outpatient	Per Hour/Session
Outpatient	Per Hour/Session
Family Group	Per Hour/Session
<u><b>Residential Services:</b></u>	
Residential	Per Bed Day
Therapeutic Living	Per Bed Day
Sober Housing	Per Bed Day

## 9. **Methods of compensation and payment**

- a. The applicant shall provide monthly invoices. Information to be included shall be client's name, date of admission, date of discharge, reason for discharge, level of service provided and number of units provided with corresponding dates and service unit billed.
- b. The applicant shall maximize reimbursements of benefits for all levels of care through Hawaii Quest and Quest Net, the client's private insurance, the Department of Human Services or any other sources of payment made known to the applicant by the client for treatment, housing or subsistence. Payments to the applicant shall be reduced by received third party payments.

### 2.4.4. **Facilities**

- A. Applicants shall provide a description of its facilities and its conduciveness to the treatment being provided.
- B. Applicants proposing to provide residential treatment and therapeutic living program services shall describe and include in the proposals the following:
  1. How security and client accountability will be achieved.

2. A site map of the facility designating all program locations, the location of each dwelling for residential and or therapeutic living program, and the gender for each dwelling.
3. A floor plan for each dwelling laying out each bedroom for clients and resident counselor(s), kitchen, dining area, living area, bathrooms and laundry area; the number of client beds per room; the number of resident counselor bed(s) per room and the maximum capacity for each dwelling.
4. The number of beds licensed for residential and/or Therapeutic Living Program services by the Office of Health Care Assurance (OCHA), Department of Health, State of Hawaii.